

REGIONAL KUMITE TOURNAMENT

Competitor Details

	ase tick YES or NO to the following question ne answer is YES to any of these questions			
Do	you have any allergies? e.g. aspirin; antibio	otics; foods? 🗆 YES 🗆 🗈	МО	
Are	you taking any form of medication at prese	ent? 🗆 YES 🗆 NO		
If ye	es, please give details:			
D00	CTOR'S DETAILS:			
1.	Name: Phone:			
	Address:			
EM	ERGENCY CONTACT DETAILS:			
1.	Name:	Relationship:		
	Phone:	Other No:		
I / m part a no of st	CLARATION (Delete as applicable) by son / daughter is capable of taking part in the icipate in the above activity and confirm that the iminated person who has agreed to supervise notaff attending/participating in the event to consecut medical treatment to be given on the advice	ey will be attending the tournan ny child. In the event of illness o ent on my behalf for an anaesth	nent with/without a parent/guardian/ or injury, I agree to authorise members etic to be administered or any other	
Sigr	ned:	Da	ate:	
Nan	ne (Please print):			
	PLEASE CHARGE MY CARD VISA edit Card Number	MASTERCARD	Expiry Date CVV	
Ne	ame on Card	Signature:	Amount: \$	



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Entry Form

Name:	Age at time of competition:		
Address:			
Country: Ph		none:	
Region:		Dojo:	
Email:			
AGE GROUPS GRADE DIVISIONS	S	• Team Events are open to all grades 8th kyu and above. TEAM DETAILS Name of your Team: List your Team Members here: 1. 2. 3.	
tournaments, as with most s 2. In consideration of my ack Karate, it's servants and age of the tournament shall be e the fullest extent permitted t liability for negligence (other or consequential loss or loss tournament. 3. Photography and filming. filming of competitors in tou competition that the compet photography and filming.	cion in martial arts, including non-contact GKR sports contains a risk of injury. ceptance in the competition, I agree that GKR ents and all persons involved in the organisation xcluded from liability for loss and damage to by law. I accept that this includes exclusion of than for death or personal injury) and all indirect of profits arising from my participation in the GKR Karate permits the photography and irraments. It is a condition for acceptance in the titor consents to the occurrence of such	Protective Equipment is Compulsory for Kumite Gloves (IGKF/WKF approved only), Shin Protectors & Mouth Guards must be worn by all competitors. Groin Guards for all male competitors are compulsory. Chest Guards are compulsory for all female competitors from 12 yrs+. Please ensure that you have ticked only the boxes relevant to your events and that all of your information is correct. Fee Paid: Sensei Sign:	
Signature:	Parent's signature: (If under 18 years of age)	Sensei Name:	



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Spectators:

All fees are strictly non refundable

Competitors Safety Equipment Is Compulsory For Kumite

Gloves (IGKF/WKF approved only). Either red or blue is acceptable, except in Open divisions where competitors will require both colours.

Shin Protectors and Mouth Guards must be worn by all competitors. Groin Guards for all male competitors are compulsory. Chest Guards are compulsory for all female competitors from 12 yrs+.

NB: 1. Competitor to keep this page for tournament details.

2. Competitor must hand in entry form along with fees to instructor.